



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E344378**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	14-01725
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

DATE OF COLLISION	07	25	2014	TIME (2400)	1041	COUNTY #	31	MILES	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	IN	<input checked="" type="checkbox"/>	CITY #	0664
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ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

91ST AVE SE BLOCK NO. ☒ **500**

MILE POST ☐

DISTANCE **300** **00** MILES ☐ **N** ☐ **E** ☐ **S** ☒ **W** ☐

OF (REFERENCE OR CROSS STREET) **4TH ST SE**

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 4253354772**

LAST NAME **BRILL** FIRST NAME **BRUCE** MIDDLE INITIAL **L**

STREET NEW ADDRESS ☐ **901 74TH DR SE**

CITY **EVERETT** ST **WA** ZIP **982051733**

CDL ☐ RESTRICTIONS **J** ENDORSEMENTS ☐

DRIVER'S LICENSE # **BRILLBL260NQ** STATE **WA** SEX **M** D.O.B. **08** **18** **1974**

ON DUTY ☐ STATUS ☐ AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **B37780F** STATE **WA** VIN# **1GCCS14A5M0184308**

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **1991** MAKE **CHEV** MODEL **S10PU** STYLE **PK** VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **BRUCE BRILL 901 74TH DR SE LAKE STEVENS WA 98258 D: 4253354772**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **PROGRESSIVE 65052645-9**

VEHICLE LEGALLY STANDING YES ☐ NO ☒ CITATION # ☐ CHARGE **IMPROPER PASSING ON RIGHT SIDE**



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 4253509839**

LAST NAME **EDWARDS-MARTIN** FIRST NAME **LARAEA** MIDDLE INITIAL **M**

STREET NEW ADDRESS ☐ **4281 SPRING CREEK LN**

CITY **BELLINGHAM** ST **WA** ZIP **982268100**

CDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # **EDWARLM096NF** STATE **WA** SEX **F** D.O.B. **08** **06** **1991**

ON DUTY ☐ STATUS ☐ AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **B74057Y** STATE **WA** VIN# **3D7KS19D56G171819**

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **2006** MAKE **DODG** MODEL **RAM 2500** STYLE **PK** VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **GEICO 4356153306**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **GEICO 4356153306**

VEHICLE LEGALLY STANDING YES ☐ NO ☒ CITATION # ☐ CHARGE ☐



OFFICER'S NAME (PRINT) **M. HINGTGEN** BADGE OR ID # **126** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E344378**

CASE # **14-01725**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-	
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-	
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-	
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES

NARRATIVE

Veh #2 was traveling south on 91st Ave SE. Veh #2 slowed and stopped in the center of the roadway to begin backing into the drivers driveway. Veh #2 began backing into the driveway while Veh #1 approached southbound. Veh #1 began passing Veh #2 on the right shoulder of the roadway. While Veh #2 was backing, it collided with Veh #1 in the drivers side. The driver of Veh #1 stated that he had only driven on the shoulder of the roadway approximately 1 foot.

The driver of Veh #1 stated that Veh #2 had no brake lights or reverse lights. I checked Veh #2 and confirmed that both brake lights and reverse lights worked properly.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

M. HINGTGEN

07-25-14 05:37 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

7/27/2014 12:00:09 PM

BADGE OR ID # **126**

ORI #

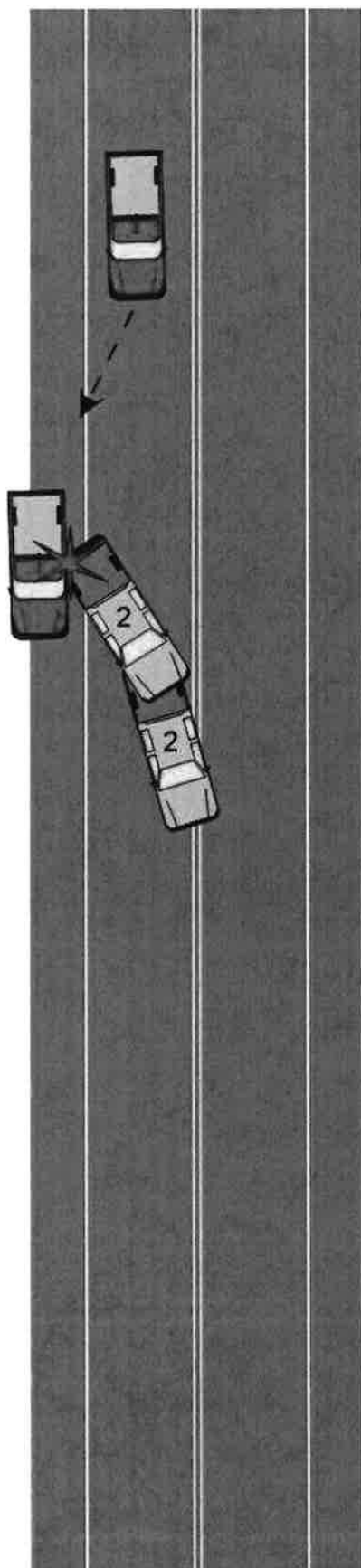
WA0311900

TIME POLICE DISPATCHED

10:49 AM

TIME POLICE ARRIVED

10:53 AM



91st Ave SE



Not to Scale

IN THE ☐ DISTRICT ☒ MUNICIPAL COURT OF **LAKE STEVENS VIOLATION BUREAU** **LAKE STEVENS** PLAINTIFF VS. NAMED DEFENDANT
☐ STATE OF WASHINGTON ☐ COUNTY OF **THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON**

DRIVER'S LICENSE NO. **BRILLBL260NQ** STATE: **WA** EXPIRES **08-18-14** PHOTO ID MATCHED ☒ YES ☐ NO NAME: LAST **BRILL** FIRST **BRUCE** MIDDLE **LEE** SFX ☐ COL ☒ YES ☐ NO
ADDRESS **901 74TH DR SE** IF NEW ADDRESS ☐ PASSENGER ☐ CITY **EVERETT** STATE **WA** ZIP CODE **982051733**

EMPLOYER **DATE OF BIRTH** **08-18-74** RACE **W** SEX **M** HEIGHT **5'09"** WEIGHT **160** EYES **BRO** HAIR **BRO** RESIDENTIAL PHONE NO. **(425)335-4772** CELL/PAGER PHONE NO. **WORK PHONE NO.**
VIOLATION DATE **07/25/2014 17:12** LANG. **INTERPRETER NEEDED** AT LOCATION **91ST AVE SE 4TH ST SE** REF. TRAFICWAY **500** BLOCK # **500** CITY/COUNTY OF **LAKE STEVENS/SNOHOMISH**

VEH LIC NO **B37780F** STATE **WA** EXPIRES **02-13-15** VEH YR **1991** MAKE **CHEVROLET** MODEL **S10PU** STYLE **PICKUP** COLOR **RED**
TR #1 LIC NO **STATE** EXPIRES **TR YR** TR #2 LIC NO **STATE** EXPIRES **TR YR**
OWNER/COMPANY IF OTHER THAN DRIVER **CITY** STATE **ZIP CODE**

ACCIDENT **NO** COMMERCIAL ☐ YES ☒ 16+ ☐ YES ☒ HAZMAT ☐ YES ☒ EXEMPT ☐ FIRE ☐ LEA ☐

VEH SPEED **IN A** **ZONE** **SMD** **PACE** **AIRCRAFT** **DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES**
1. VIOLATIONS/STATUTE CODE **46.61.115** IMPROPER PASSING ON RIGHT SIDE **PENALTY \$ 124.00**

2. VIOLATIONS/STATUTE CODE **PENALTY \$**

3. VIOLATIONS/STATUTE CODE **PENALTY \$**

4. VIOLATIONS/STATUTE CODE **PENALTY \$**

5. VIOLATIONS/STATUTE CODE **PENALTY \$**

RELATED # **DATE ISSUED 07-25-14** TOTAL PENALTY \$ **124.00**
ICERIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

OFFICER **M. HINGTGEN** # **126** OFFICER # **NOTICE OF INFRACCTION**

☐ TICKET SERVED ON VIOLATOR ☐ TICKET REFERRED TO PROSECUTOR
☒ TICKET SENT TO COURT FOR MAILING

NOTICE OF INFRACCTION
This is a non-criminal offense for which you cannot go to jail.
YOU MUST RESPOND WITHIN FIFTEEN (15) DAYS FROM THE DATE ISSUED.
Your response must be postmarked by midnight of the day it is due at the court.
If you do not respond or appear for court hearings:

TRAFFIC The court will find that you committed the infraction.
You may lose your driver's license privilege.
Your penalty will be increased.
Failure to pay may result in a referral of your case to a collection agency.
NON-TRAFFIC The court will find that you committed the infraction.
It is a crime and will be treated accordingly.
Your penalty may be increased.
Failure to pay may result in a referral of your case to a collection agency.

Check one of the 3 boxes to the right, sign, date, and mail this form to:
LAKE STEVENS VIOLATION BUREAU
PO BOX 257
LAKE STEVENS WA 98258

Court contact information:
Phone 1: **(425)334-1012**
My mailing address is: (PLEASE PRINT)
Name: **BRILL, BRUCE L**
Street or PO Box **PO BOX 257** Apt **LAKE STEVENS WA 98258**
City: **LAKE STEVENS** State: **WA** Zip Code: **98258**
Telephone: Home: **420757359** Work: **420757359**
Is interpreter needed? Language: **English**
X: **420757359** (SIGNATURE)

Incident History for: #SS14014431 Xref: #AG14002114

Case Numbers: \$SS14001726

Entered 07/25/14 11:31:41 BY SPCT05 SP0320

Dispatched 07/25/14 11:32:02 BY SPDP17 SP0100

Enroute 07/25/14 11:36:22

Onscene 07/25/14 11:36:22

Closed 07/25/14 12:33:41

Initial Type: AF Initial Alarm Level: Final Alarm Level:

Final Type: WARR (WARRANT) Pri: 3 Dispo: J

Police BLK: SS003 Fire BLK: AG1419 Map Page: 397G-2 Group: SS1 Beat: WEST

Src: T

Loc: 422 W DAVIES LOOP RD ,LKS btwn S DAVIES RD & S DAVIES RD (V)

Loc Info:

Name: NORTON, KEN

Addr:

Phone: 4253870934

/1131 (SP0320) ENTRY ,AC, X ST, SLUMPER IN A SILV HONDA, SINCE 7AM
/1131 CROSS #AG14002114
/1131 CHANGE PHO: --> 4253870934
/1132 (SP0100) DISP 19D2 #SS126 HINGTGEN, OFFICER (MICHAEL)
/1133 (SS126) REMINQ 19D2 MDTVEH, 860XQS, ,WA, , , , , , , , ,
/1136 (SP0100) ONSCNE 19D2
/1140 CHANGE LOC: 422 N DAVIES RD ,LKS --> 422 W DAVIES LOOP
RD ,LKS,
BLK: SS002 --> SS003
/1140 (SP0251) SUPP LOC: 422 N DAVIES RD ,LKS,
TXT: AID UNABLE TO LOCATE
/1142 (SP0100) REMINQ 19D2 VEH, 19D2, APR3798, , , , , , , , , , , , , , ,
/1145 (SS126) REMINQ 19D2 MDTWANT, MATTHEWS, KYLE, T, 091993, , ,WA, , , , , , , , , , ,
,
/1145 REMINQ 19D2 MDTWANT, STUART, CAROL, J, 080986, , ,WA, , , , , , , , , , ,
/1146 (SP0100) CONTCT 19D2 Contact in 5 Minutes
/1148 CONTCT 19D2 Contact in 5 Minutes
,ONE DETN
/1148 ASSTOS 19D1 [422 W DAVIES LOOP RD ,LKS]
#SS102 PLANALP, OFFICER (DANIEL)
/1148 (*****) REMINQ 19D2 MATTHEWS. KYLE. T. 09191993. .
/1148 (SP0100) REMINQ 19D2 NAME, 19D2, MATTHEWS, KYLE, T, 09191993, ,
/1149 (*****) REMINQ 19D2 MATTHEWS. KYLE. D. 09191993. .
/1149 (SP0100) REMINQ 19D2 NAME, 19D2, MATTHEWS, KYLE, D, 09191993, ,
/1149 (SS126) REMINQ 19D2 MDTVEH, APR3798, ,WA, , , , , , , , ,
/1149 REMINQ 19D2 MDTWANT, STUART, CAROL, J, 080986, , ,WA, , , , , , , , , , ,
/1149 (*****) REMINQ 19D1 860XQS
/1149 (SP0100) REMINQ 19D1 LIC, 19D1, 860XQS, , ,
/1150 REMINQ 19D1 VEH, 19D1, APR3798, , , , , , , , , , , , , , ,
/1152 (SS102) REMINQ 19D1 MDTVEH, APR3798, ,WA, , , , , , , , ,
/1155 (SP0100) CHANGE TYP: AF
--> WARR
/1157 MISC ,11:57:16 FROM ACCESS - DATABASE ID: NCIC FOR UN
IT: 1LO1043S00L95XLW WA0311900LOCATE NAM/MATTHEW
S, KYLE DEAN OCA/121000446
/1158 OK 19D1
/1158 OK 19D2
/1159 TRANS 19D2 [COUNTY JAIL]
/1159 ASNCAS 19D2 \$SS14001726
/1159 (SS102) CLEAR 19D1
/1212 (SP0100) TRANSC 19D2
/1215 OK 19D2
/1233 CLEAR 19D2 D/J

LSPD
ORIGINAL

LAKE STEVENS POLICE DEPARTMENT

FOLLOW-UP / ROUTING SHEET

CASE NUMBER

14-01725

MUST HAVE **CITATION NUMBER** OR **SUSPECT** INFO IF FORWARDING TO PROSECUTOR, COURT OR INVESTIGATIONS.

DATE

CITATION #

SUSPECT

DOB

CITATION #

SUSPECT

DOB

CITATION #

SUSPECT

DOB

OFFICER / DETECTIVE REQUEST

☒ ADD DOCUMENTS TO ORIGINAL FILE☐ NO FURTHER ACTION REQUIRED☐ ADDITIONAL STOLEN OR RECOVERED PROPERTY SHEETS ATTACHED FOR DATA ENTRY☐ FORWARD FOLLOW-UP (COURT HAS OPEN FILE ON CASE)☐ FORWARD COMPLETED COPY OF CASE☐ MARYSVILLE COURT☐ SNO CO FELONY DIVISION☐ WACIC / NCIC ENTRY FOR RECORDS☐ CITY PROSECUTOR☐ JUVENILE COURT☐ WASH STATE LIQUOR CONTROL☐ REVIEW FOR CHARGES☐ CPS/DSHS ☐ EVERETT ☐ SKY VALLEY☐ OTHER:

DATE SENT:

7-30-14

BY:

CB #90

☐ FORWARD **ORIGINAL FILE** WITH THE **FOLLOW-UP** TO COURT☐ CITATION JUVENILE REFERRAL ATTACHED☐ SUBJECT REFERRED FOR **FELONY** CHARGING

DATE SENT:

BY:

☐ PROSECUTOR FOLLOW-UP RESPONSE (**ATTACH PROSECUTOR REQUEST FORM**)☐ INVESTIGATIONS

OFFICER ASSIGNED

DUE DATE

CASE CLOSED

☐ UNFOUNDED☐ ARREST MADE SENT TO COURT☐ LACK OF INVESTIGATIVE LEADS☐ VICTIM REQUEST

OFFICER / INVESTIGATOR



126

DATE SIGNED

7/30/14

SERGEANT APPROVAL

DATE SIGNED

RECORDS DATA ENTRY

ADDITIONAL

PERSONS ☐PROPERTY ☐ARRESTS ☐

RECORDS:

DATE:

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 14-01725

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Edwards Martin LaRocca	RACE Latino	ETH	SEX F	DOB 08/06/91	AGE 22	HGT 5'6"	WGT 150	HAIR BRN	EYES BRN
STREET ADDRESS 502 91st ave SE Unit A		CITY Lake Stevens			STATE WA	ZIP 98258	RES. STATUS Rent			
HOME PHONE		CELL PHONE 425-350-9639			PLACE OF EMPLOYMENT Tulalip Bingo					
WORK PHONE		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

On July 25, 2014 approx at 10:30 am in brod daylight was driving down 91st ave se a 2 lane road was reversing into my drive way on the right side of the road going south, and as soon as I reversed a red truck tried passing through and hit my passenger rear. I stopped immediately and notice the driver that hit me didn't stopped so I followed him and than reported it.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:	DATE SIGNED 7-25-14	LOCATION SIGNED
OFFICER/NUMBER: 126	DATE SIGNED 7/29/14	LOCATION SIGNED LAKE STEVENS

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-01725

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Brill Bruce L	RACE C	ETH	SEX M	DOB 8/18/74	AGE 39	HGT 58	WGT 150	HAIR BRN	EYES BRN
STREET ADDRESS 901 74TH DR SE Lk Stevens		CITY			STATE WA	ZIP 98258	RES. STATUS			
HOME PHONE 425 335 4772		CELL PHONE 425 345 2088			PLACE OF EMPLOYMENT Protexture					
WORK PHONE		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY : (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Grey Dodge 4x4 was turning left into what appeared to be a driveway then suddenly stopped, no brake lights no reverse lights nothing. Then I had no choice but to pass her she then proceeded to put her vehicle in reverse and basically T-Boned my vehicle while in reverse. I do not believe the driver of the other vehicle could even see me because she is very short and driving a very tall truck.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE 	DATE SIGNED	LOCATION SIGNED
OFFICER/NUMBER: 125	DATE SIGNED 7/29/14	LOCATION SIGNED LAKE STEVENS

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___